								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 09/889,207												7 .	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			. *:					RATE	FEE	1	RATE	FEE	
F	OR		NUMBER FILED		NUM	BER EXTRA	A BAS		E 385.00	OR	BASIC FEE	770.00	
ĸ	OTAL CHARGE	ABLE CLAIMS	minus 20=		• -			X\$ 9=		OR	X\$18=		
ואו	DEPENDENT C	LAIMS	3 "	nimus 3 c				X43=		OR	X86=		
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT				+145=			OR	+290=		
• 11	the difference	e in column 1 is	less than zero, enter "0" in column 2				<u> </u>	TOTAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II									•	OTHER		
	(Column 1) (Column 2) (Column 2) (Column 2) (Column 3)						S	MALL	ENTITY	OR	SMALL	ENTITY	
AMENOMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	BEA	PRESENT EXTRA	R	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	· 10:	Minus	- 20)	=	,	(\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		0	_	K43=		ОЯ	X86≈		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145			+290= ·		
									1,	OR	TOTAL	:	
									ليبيا	OR,	ADDIT. FEE		
	• . •	(Column 1)	,	(Colum	_	(Column 3)	_				· · · ·		
NTB	,	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	LER USLY	PRESENT EXTRA	Я	ATE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE	
Ž Q	Total '	- 14	Minus	20) .		X	\$ 9=		OR	X\$18=		
AMENDMENT	Independent	•	Minus	••• 4	•	= _	×	(43= .	•	OR	X86=		
	PHESE	TIAST PRESERVATION OF MU		LTIPLE DEPENDENT C		AIM L		145=		OR	+290±		
•								TOTAL		OR ,	TOTAL CODIT, FEE		
2	14/05	(Column 1)	_	(Cotum	n 21	(Column 3)	ADO	n. Fee i			wui. Peel		
	`	CLAIMS		HIGHE	डा		1		ADDI-	ſ		ADDI-	
15 L		REMAINING AFTER AMENDMENT	•	PREVIOU PAID F	JSLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL	
	Total	. 13	Minus	· 2.	0	t .	X	\$ 9=		OR	X\$18=		
	Indep ndent	• /	Minus	*** 4		0	X	43=		<u>.</u> [X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1			OR			
		.+1	45=		OR	+290=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. — If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE													
1	i the "Highest Num Tie "Highest Numi	nber Previously Pa ber Previously Paid	id For IN THIS For (Total or	S SPACE is independen	tess thar d) is the	n 3, enter "3." highest number		_	ropriate box				